



STATE OF MARYLAND

DHMHOffice of Health Services
Medical Care Programs**Maryland Department of Health and Mental Hygiene**

201 W. Preston Street • Baltimore, Maryland 21201

Parris N. Glendening, Governor - Georges C. Benjamin, M.D., Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM
EPSDT: Private Duty Nursing Services Transmittal No. 5
Model Waiver Program Transmittal No. 20

January 19, 2001

Early and Periodic Screening, Diagnosis and Treatment:
 Private Duty Nursing Providers
 Model Waiver Nursing Providers

FROM: Joseph M. Millstone, Executive Director
 Office of Health Services

NOTE: Please ensure that appropriate staff members in your organization are informed about the contents of this transmittal.

Conditions of Participation

The Division of Nursing Services (DONS) is charged with the responsibility of administering the Early and Periodic Screening, Diagnosis and Treatment: Private Duty Nursing (EPSDT:PDN) Program which is regulated by COMAR 10.09.53. The Division of Nursing Services' staff have initiated onsite audits of EPSDT:PDN providers. During these onsite audits, the staff review documentation related to recipients' services as well as administrative information. This information includes, but is not limited to, documentation of current nursing licensure and CPR certification, billing records, timesheets, nursing notes, plans of care (POC), physician orders, employment records and agency policies related to the delivery of health care services.

The purpose of this transmittal is to inform providers the type of documentation which the reviewers will request during the performance of audits as well as remind providers of the requirements related to conditions of participation pursuant to COMAR 10.09.53.03. Specifically, a provider must maintain the following documentation to be in compliance with basic Medicaid regulatory requirements:

Copies of current and properly signed nursing licenses to ensure each nurse providing services to Medicaid recipients has a valid unrestricted nursing license as required by COMAR 10.09.53.02 and .03C(1).

A demonstration of competency and skills checklist completed for each nurse as required by COMAR 10.09.53.03C(2).

Verification and documentation of each nurse's clinical experience including one (1) year of clinical pediatric experience within the last two (2) years when delivering services to a medically fragile child or newborn as required by 10.09.53.03C(3) and (4).

Copies of current, valid cardio-pulmonary resuscitation (CPR) certificates for each nurse rendering services to Medicaid recipients as required by COMAR 10.09.53.03C(7).

Policies related to services delivered to Medicaid participants as specified by COMAR 10.09.53.03D.

Employment records for each employee which must include character reference checks, documentation of the conduct of face-to-face interview and verification(s) of the applicant's past employment (COMAR 10.09.53.03E.).

Proper nursing licensure and CPR certifications are extremely important due to the nature of the medically fragile population served via the EPSDT:PDN program. Providers are, therefore, reminded of their responsibility to ensure all nursing licenses and CPR certifications are current and signed.

Another critical area involving documentation concerns nursing progress notes. Nursing progress notes maintained by providers must adequately describe the medical care and nursing interventions rendered to assure the provided services are covered in accordance with COMAR 10.09.53.04. Additionally, COMAR 10.27.09.02B(5) of the Nurse Practice Act states nursing "assessment shall be communicated on proper records...The records shall reflect changes in health status and a continuous collection of data by updating and revising of the nursing assessments."

It is imperative that nursing notes be written in such a manner as to enable reviewers to determine the recipient's medical status and the specific nursing interventions performed. This means the documentation must be specific as to the nursing procedure/intervention performed as well as its frequency and duration. The documentation must reflect the recipient's medical status in such a manner as to adequately describe his/her condition. A written note such as "the recipient had a seizure" is inadequate. The note should indicate the length of the seizure, the recipient's physical condition during the seizure, etc. It is of the utmost importance that all agencies review their policies regarding the documentation of rendered care.

If you find your current policies are insufficient, revision and adoption of an adequate policy is in order. To assist providers, a current copy of the EPSDT:PDN regulations are attached. Additionally, you may reach the staff during normal business hours (M-F 8:00 a.m. to 5:00 p.m.) to address any issues and or questions regarding the EPSDT:PDN Program. Please refer your questions to the Division of Nursing Services' staff by calling (410) 767-1448 or 1-800-463-3464.

JMM/cd

Enclosure